

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.



Richard Allen, Commissioner, ALDOC  
Legal Division  
P.O. Box 301501  
Montgomery, AL 36130

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ Agent  
☐ Addressee

*Kay P. Hope*

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  
or delivery address below:

*2:07cy 338*  
*pro order*  
*comp*

☒ Registered  
☐ Insured Mail

☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

*0138 833 9271 5*

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540